

# UHIP Governance Committee Meeting

## Wednesday, December 19, 2012

### State Capitol, Senate Office Building

### Olmsted Room

#### Attendees

Last Name	Title	Facility	2/16	4/25	6/27	8/29	10/29	12/19
Abouzelof, Rouett	RN	Primary Children's MC	X	Exc.	X		X	X
Betit, Rod	Mr.	UT Hospital & Health System Assoc.		Exc.			X	X
Clemmer, Terry	DR	Intermountain Healthcare		Exc.	Exc.		Exc.	
Daly, Judy	DR	Primary Children's MC		X	X		X	Exc.
Draxler, Jack	Rep	Utah House of Representatives	X				X	
Evans, Lisa	RN	Uintah Basin Medical Center		X	X		X	X
Guseman, Melissa	RN	Salt Lake Surgical Center		X	X		X	Exc.
Heikens, Brett	RN	Kolff Dialysis Center	X	X	X		X	X
Hull, Dan	Mr.	Home Care and Hospice						
James, Brent	DR	Intermountain Healthcare	Exc.	X	X			
Jarrett, Arlen	DR	lasis Healthcare Utah Division	Exc.	X	X			X
Keene, Peggy	RN	Mountain West Medical Ctr.	X	X	X			X
Kinsey, Wayne	RN	Promise Hospital of Salt Lake	X	X	X		X	X
Kurrus, Tom	DR	Mountain Star/St. Marks						
Markewitz, Boaz	DR	University of Utah Pulmonary	X					Exc.
Mayer, Jeanmarie	DR	Univ. Health Care/University Hospitals & Clinics	X	X	Exc.		X	X
Miner, Joe	DR	Utah County Health Dept.			X		X	Exc.
Olsen, Rex	JD	Asst. Attorney General	Exc.	X	X		X	Exc.
Petrolonis, Patty	RN	Salt Lake Regional Medical Center	X	X				
Preston, Juliana	Ms.	HealthInsight		X	X			
Prothero, Marie	CEO, RN	Utah Valley Specialty Hospital		X	X		X	Exc.
Reese, Carolyn	RN	Utah Healthcare Association	X	X			X	X
Rolfs, Robert	DR	State Epidemiologist, Division Director	X	X	X		X	X
Sanpei, Dean	Rep.	Utah House of Representatives			X			Exc.
Smith, Doug	DR	Intermountain Healthcare	X	X	X		X	X
<b>UTAH DEPARTMENT OF HEALTH</b>								
Alvarez, Felicia	Ms.	Epidemiologist	X	X	X		X	X
Crook, Jacob	Mr.	Analytical Epidemiologist						
Matheson, Karla	Ms.	Admin Assistant	X	Exc.	X		X	X
Eutropius, Louise	Ms.	Infection Preventionist					X	X
Rasmussen, Kim	Ms.	MDRO Coordinator						X
Reed, Carrie	Ms.	CAUTI Prevention Collaborative Leader	X		X			
Varley, Sherry	RN	Infection Preventionist	X	X	X			X
<b>GUESTS</b>								
Dimond, Melissa	Ms.	Utah Department of Health					X	X
Dupont, Cathy	Ms.	Legislative Staff					X	
Horne, Scott	Mr.	UT Hospital & Health System Assoc.					X	
Inzunza, Trell	Ms.	Univ. Health Care/University Hospitals & Clinics					X	
Johnson, Linda	RN	HealthInsight	X	X	X		X	
Spilker, Aaron	Mr.	Promise Hospital of Salt Lake					X	

**Action Items highlighted in yellow.**

**Welcome & Introductions: Jeannie Mayer, MD**

- Meeting commenced at 3:00 P.M; attendees and phone participants introduced themselves.

**October Minutes Review & Approval: Jeannie Mayer, MD**

- First Motion: Doug Smith
- Second Motion: Wayne Kinsey
- Minutes approved as presented.

**MDRO Detection and Prevention Collaborative Summation: Felicia Alvarez**

- The UDOH hired a Multidrug Resistant Organisms (MDRO) Project Coordinator, Kim Rasmussen, RN, who was introduced at the meeting. The Collaborative had a very successful and well attended kick-off meeting on 11/5/12. The Collaborative is a complex project intended to prevent transmission of MDROs as patients transfer across multiple healthcare settings based on a two-pronged approach: 1) Situational awareness of carbapenem-resistant *Acinetobacter* (CRAB) and carbapenem-resistant enterobacteriaceae (CRE) across all participating healthcare systems, and 2) development, with front line staff, of a feasible standardized transfer process to be used across all participating systems.
  - Improve situational awareness of CRAB/CRE:
    - Reporting of CRAB/CRE to UDOH via a Communicable Disease Rule
    - Ability for labs to identify CRAB/CRE with review of detection protocols
    - Create and share basic exposure network graphs
    - Stakeholder input re: data dissemination
  - Improve communication across transfers:
    - ED/EMS knowledge/attitudes knowledge/attitudes for MDRO transmission and prevention issues
    - Outline, implement, and evaluate a standard transfer process across systems
- Five subcommittees have been formed to address the various components of the MDRO Collaborative objectives:
  - Environmental Services
  - Patient Transfer Implementation
  - Surveillance and Reporting
  - Lab Detection
  - Signage and use of Personal Protective Equipment (PPE) for Isolation
- To date, three of the five subcommittees have already met; stakeholders will meet in person two to three times. There will be monthly conference calls with all groups starting in January to discuss findings/progress/tasks/share information.
- Concerns about increased work burden for Infection Preventions and local health departments addressed:
  - Bare bones surveillance sheet
  - Education for smaller facilities is needed

- Dr. Mayer reported on the Surveillance Reporting sub-committee discussion of a proposal to create exposure network graphs to learn how CRAB/CRE can be spread/shared across healthcare systems to better understand how to control transmission. Currently, Intermountain Healthcare and University of Utah Health Care are voluntarily participating in a pilot project reporting de-identified CRAB/CRE data to UDOH. Review of this de-identified data highlights limitations in fully understanding how MDROs can be acquired/transmitted/shared across healthcare systems. Dr. Mayer reported that the Surveillance sub-group felt there would be greater understanding as well as collaboration if participating facilities were willing to not only report to the UDOH, but to share their CRAB/CRE data with each other. This information would not be public, but could be used by all stakeholders to identify potential inter/intra-facility MDRO transmission issues that could facilitate timely institution of prevention strategies. Project leads and administration at the various involved healthcare systems are to discuss the level of, and how to accomplish, sharing of data in order to better understand and prevent MDRO transmission. Dr. Mayer plans to put together a document that can be shared with facilities clarifying intent.
  - Dr. Mayer asked members how the hospitals may feel about this. She requested members think about this issue, discuss it with their respective facilities and tasked members to be ready to discuss facility issues/concerns at the next UHIP meeting.
  - Would likely involve IRB and need to sign a Data Use Agreement.

#### **CD Rule and HAI Administrative Rule Update: Felicia Alvarez**

- Reporting of carbapenem-resistant *E Coli*, *Acinetobacter* and *Klebsiella spp.* will be added to the CD rule; changes have been submitted and are currently going through the Department internal review process. It is anticipated the updated rule will be effective February 2013.
- HAI Administrative rule changes have been updated to reflect HAI reporting requirements to be consistent with CMS mandated HAI reporting timelines; effective as of November 21, 2012.
- Discussion regarding healthcare worker influenza vaccination reporting deadlines.
  - Current Rule reporting deadline not the same as required by CMS (through NHSN) for 2013-2014 influenza season.
  - Request was made to UDOH to change Rule to be consistent with CMS reporting (to NHSN) timeline.
  - Discussion points:
    - Influenza reporting not considered a HAI; therefore, current HAI Administrative rule changes did not reflect CMS influenza reporting criteria mandate.
    - Most facilities administer influenza vaccine to the majority of their employees by December; therefore, data should be available by January.
    - Rather than change the Rule, UDOH could footnote annual report with statement that data may be incomplete due to “late reporting.”
    - Felicia will follow-up with issues as discussed; HAI Rule will not be changed at present.

### **HAI Work Group Update – Rouett Abouzelof**

- Next meeting is December 20<sup>th</sup>.
- Agenda will include:
  - Composition of members re: changes/additions
  - Goals for 2013

### **State HAI May 2013 and October 2013 Report Elements – Sherry Varley**

- Sherry presented a PowerPoint presentation on the House Bill 55 required HAI annual report status.
  - May 2013 report will reflect Q1-4 2011 and Q1-2 2012 CLABSI data.
  - October 2013 report will reflect all of Q1-4 2012 CLABSI data.
- Due to the CMS reporting deadlines (to NHSN), Rep. Draxler agreed that all future annual reports could be published each October (rather than May) in order to capture all the previous year's (Q1-4) reportable HAI data.
  - Rod Betit was scheduled to present the above information to UHA Board of Directors at their last meeting.
- Validation of facilities reporting CLABSI for 2011 begins January of 2013. Letters went out to the selected five facilities notifying them of the date and time they will be validated.
  - Validation results will be included in the May 2013 Annual Report.
- On March 1, the Department will distribute the proposed Annual Report to all reporting hospitals for a 30-day comment period.
  - Comments will be evaluated; report will be edited based on merits.
- Final annual report will be available for the public and posted on the UDOH website.
- Sherry solicited input for 2013 validation activities/priorities.
  - Dr. Smith suggested choosing only one event for best validation efforts/outcome.
  - Dr. Mayer suggested that we talk with the Infection Preventionists (IP) and request their input.
    - Rouett stated she will add the validation discussion to the HAIWG agenda for tomorrow's meeting.
  - Whatever event(s) are chosen, the primary goal is that the validation process will provide IPs with resources to assure facilities are in compliance with NHSN surveillance and prevention activities.

### **Needs Assessment for Infection Preventionists – Dr. Mayer**

- The last IP Needs Assessment was performed in 2006-2007. With so many new mandates that IPs need to meet, that assessment is now outdated. It was agreed it should be updated.
  - Discussion centered on useful topics/questions to be surveyed:
    - Where are you spending your time?
    - What do they feel you need in terms of resources or training?
    - What are the needs within the state/how can the UDOH help?

- Sherry Varley suggested that the IPs in the HAIWG come up with questions for the updated assessment.
  - Louise Eutropius will locate a copy of prior Needs Assessment survey and send it to Rouett for reference.
  - Rouett will add to December 20 HAIWG agenda.

#### **2012 UHIP Governance Committee Accomplishments – Dr. Mayer/Committee**

- 2012 UHIP Governance Committee Accomplishments were as follows:
  - Public HAI Reporting and Disclosure – Close working relations with Rep. Draxler in negotiating and resolving several HAI reporting issues seen as barriers to full implementation of HB 55.
  - Members' promotion of and participation in various Prevention Collaboratives.
  - Establishing collaboration relationships with several representatives of the Utah Legislature.
  - Involvement in the Prevention of CLABSI and Prevention of CAUTI education process.
  - Providing feedback for and endorsing the educational resources provided by the UDOH, including webinars on various topics.
  - Engaging stake holders and sharing resources/information statewide.
  - Promoting and endorsing mandatory influenza vaccination for healthcare workers.
  - Adding new committee members to ensure broader representation by healthcare associated entities.
  - Thoughtful discussions and recommendations regarding HAI-related topics.

#### **2013 UHIP Governance Committee Meeting Schedule- Dr. Mayer**

- Based on member survey results, the 2013 UHIP GC meetings will be held from 3:00-5:00 P.M. on the following afternoons:
  - March 19th
  - June 18th
  - Sept 17th
  - Dec 17th
- As soon as meeting room arrangements are finalized, an email notice will be forwarded to all committee members.

#### **Other Items:**

- Committee Membership
  - UHIP GC membership reviewed to determine if representation is adequate at present or needs to be broadened to include representatives from other healthcare-related entities.
  - Addition of other MDs representing pulmonary medicine and surgery.

- Citizen to sit on the committee, possibly someone from AARP or the Consumer Union.
- Dr. Rolfs mentioned a Liability Attorney to get their prospective. Dr. Mayer suggested that this might be an interesting guest for a future meeting.
- Members were tasked suggestions on who might be good addition/nominations for potential committee members.
- Suggestions for Topics, Goals or Objectives for 2013
  - MDRO projects will likely be a big focus next year.
  - Have subcommittee reports on laboratory methods, isolation practices.
  - Have a discussion on signage and have a “show and tell” on what signage facilities are using.

Meeting adjourned.

**Next meeting: Wednesday, March 19, 2013, 3:00-5:00 pm. Meeting room location to be announced.**